## FEC FORM 3X

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202020

FE6AN026

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED. SECRETARY OF THE SENATE

12 JUL 19 AM11: 44

Office Use Only

						Office	Jse Uniy	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.			12FE4M5			
Democratic Senatorial	Campaign Co	mmittee	L	1 1 1 1	1 1 1	1 1 1 1	1 1 1	!
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ADDRESS (number and street)	120 Maryland Aver	nue, NE		<u> </u>	111			
Check if different than previously reported. (ACC)				1111			<u> </u>	أسسلسا
	Washington				DC	2000	2 -	
2. FEC IDENTIFICATION NU	MBER ▼	CITY _			STATE 4	•	ZIP COD	E
C C00042366		3. IS THIS REPORT		NEW N) <b>OR</b>	×	AMENDED (A)	•	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2	)	May 20 (M5)	<u> </u>	Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due on.	Mar 20 (M3	) × .	Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q:		Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
July 15	(C) 12-Day	ction	Primary (12P) Convention (12C)		Ge	neral (12G)	F	Runoff (12R)
Quarterly Report (Q2 October 15 Quarterly Report (Q3	Report fo	or the:			Spe	ecial (12S)		
January 31 Year-End Report (YE		Election on	M M /	D D /	Y Y	Y Y	in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-El		General (30G	(30G)		noff (30R)	(	Special (30S)
Termination Report (TER)		Election on	M M /	D D /	Y Y	Y Y	in the State of	
5. Covering Period 05	/ a a v 01	y y y 2012	through	м м 05	/ в 31	ט / Y Y 20	y y 12	
I certify that I have examined this  Type or Print Name of Treasurer	_	best of my kno	wledge and b	pelief it is tru	ue, correc	ct and comple	te.	
Signature of Treasurer	Dr 1			E	Date	M M / C 07 :	<b>9</b> ′ ′	y y y 2012
NOTE: Submission of false, erroned	ous, or incomplete in	formation may su	ubject the pers	on signing t	his Repor	t to the penalt	ies of 2 U.	S.C. §437g.
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